PTO/SB/21 (02-04) Approved for use through 07/31/2006, OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE lection of information unless it displays a valid OMB control number the Paperwork Reduction Act of 1995, no persons Application Number 10/783.843 **TRANSMITTAL** Filing Date 2/20/2004 **FORM** First Named Inventor B.W. Busch Art Unit (to be used for all correspondence after initial filing) 2823 Examiner Name J.A. Garcia Attorney Docket Number MI22-2388 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance communication ~ Drawing(s) Fee Transmittal Form to Technology Center (TC) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC ~ Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a Proprietary Information After Final **Provisional Application** Power of Attorney, Revocation Status Letter Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please Terminal Disclaimer Identify below): Extension of Time Request Return Receipt Postcard Request for Refund **Express Abandonment Request** CD, Number of CD(s) Information Disclosure Statement Remarks Certified Copy of Priority Customer No. 021567 Document(s) The Commissioner is hereby authorized to charge any additional fees required under 37 C.F.R. Response to Missing Parts/ Section 1.16 and Section 1.17 and credit any overpayments to Account No. 23-0925. Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm David G. Latwesen, Ph.D. Wells St. John P.S. Individual name Signature Date May 3, 2006 CERTIFICATE OF TRANSMISSION/MAILING

sufficient postage as MAXXIMAX:in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Express Mail the date shown below.

Typed or printed name *** VIA EXPRESS MAIL *** Date Signature

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)	200.00
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Complete if Known				
Application Number	10/783,843			
Filing Date	2/20/2004			
First Named Inventor	B.W. Busch			
Examiner Name	J.A. Garcia			
Art Unit	2823			
Attorney Docket No.	MI22-2388			

METHOD OF PAYME	NT (check all	that apply)				•	
		Money Order					
Deposit Account	Deposit Accoun	t Number: 23-092	5	Deposit A	.ccount Name:	Wells St. John	P.S.
For the above-ide	ntified deposit	account, the Direc	tor is hereb	y authorized to	o: (check all th	at apply)	
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WARNING: Information on t information and authorization		come public. Cred	it card inforr	mation should r	ot be included	on this form. Prov	vide credit card
FEE CALCULATION							
1. BASIC FILING, SEA	ARCH. AND	EXAMINATION	FEES				
	FILING I	FEES	SEARCI			TION FEES	
Application Type	Fee (\$)	imall Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	mall Entity Fee (\$)	Fees Paid (\$)
Utility .	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FE	ES						Small Entity
Fee Description	£ D -:	b -1-i	20 ad		ha amiaimal m	atant	Fee (\$) Fee (\$) 50 25
Each claim over 20 or,							
Each independent claim		or Reissues, eac	n maepen	dent claim in	ore than in t	ne original pate	360 180
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HP = highest number of total	al claims paid for	, if greater than 20			100 101	10014	<u>∞ (♥)</u>
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3. APPLICATION SIZE If the specification ar		exceed 100 shee	ts of paper	r, the applica	tion size fee	due is \$250 (\$	125 for small entity)
for each additiona	ıl 50 sheets o	r fraction thereo	of. See 35	U.S.C. 41(a)	(1)(G) and 3	37 CFR 1.16(s)	
Total Sheets	Extra Shee			additional 50			<u>Fee Paid (\$)</u>
100 =		/ 50 =	(round up to a	whole number) ×	_=
4. OTHER FEE(S)							Fees Paid (\$)
Non-English Speci	fication, \$1	30 fee (no smal	l entity dis	scount)			
Other: Originally 69 claims w/8 independent; Now 31 claims & 9 indep. Pay for 1 Add'l Indp Claim			200.00				

SUBMITTED BY		$\overline{\Delta}$			
Signature	/ (Ţ	7	Registration No. (Attorney/Agent) 38,533	Telephone (509) 624-4276
Name (Print/Type)	Dayid G	Latv	wesen, Ph.D.		Date May 3, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

RESPONSE TO MARCH 21, 2006 FINAL OFFICE ACTION Response Filed After Final Action

To:

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

From:

David G. Latwesen, Ph.D. (Tel. 509-624-4276; Fax 509-838-3424)

Wells St. John P.S.

601 W. First Avenue, Suite 1300 Spokane, WA 99201-3828

AMENDMENTS